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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information untess it displays a valid OMB control number. Application or Docket Number Filing Date: PATENT APPLICATION FEE DETERMINATION RECORD To be Mailed 10790957 03/01/2004 Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY RATE (\$) FEE (\$) FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) ■ BASIC FEE N/A N/A N/A N/A 37 CFR 1.16(a), (b), or (c)) SEARCH FEE N/A N/A N/A N/A (37 CFR 1,16(k), (i), or (m)) **EXAMINATION FEE** N/A N/A N/A N/A (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS X \$50 = X \$25 = OR minus 20 = (37 CFR 1.16(i)) INDEPENDENT CLAIMS X \$100 = X \$200 = (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) ☐APPLICATION SIZE FEE for each additional 50 sheets or fraction (37 CFR 1.16(s)) thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) + \$180 +\$360 MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) TOTAL " If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT ADDITIONAL ADDITIONAL ⋖ 10/19/06 RATE (\$) RATE (\$) **AFTER** PREVIOUSLY FEE (\$) FEE (\$) ENT AMENDMENT PAID FOR Total (37 CFR - 52 Minus **- 52** - 0 ENDMI 0 X \$25 = OR X \$50° - 18 Minus - 18 = 0 OR X \$200= 0 X \$100 = Application Size Fee (37 CFR 1.18(s)) ₹ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) TOTAL TOTAL OR ADD'L ADDL FEE 7-16-07 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDITIONAL REMAINING PRESENT ADDITIONAL 8 NUMBER RATE (\$) RATE (\$) **AFTER** PREVIOUSLY **EXTRA** FEE (\$) FEE (\$) ENT AMENDMENT PAID FOR Total or cen Minus X \$25 = OR ENDM = Ø X \$50 = 1.15(3) Independent Minus X \$100 = OR X \$200 = Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) TOTAL TOTAL CALCULATE ADD'L OR ADD'L FEE FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". Linda W. Badie *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter '3'. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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